

ORIGINAL ARTICLE

Experiencing mindfulness meditation—a client narrative perspective

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Abstract

The study was based on the non-participant involvement of the researcher in four six-to-eight weeks' mindfulness meditation training courses led by chartered psychologists. The participants suffered from stress/sleeplessness, depression or agoraphobia in the presented cases. They were selected on the basis of recommendations by the psychologist who was the course instructor, who described them as positive and suitable. The participants wrote diaries on a weekly basis, and they were interviewed at the beginning, middle and end of the course. An in-depth analysis of three individual cases will be presented in the form of narratives constructed from their own words. The narratives demonstrate the unique and embodied changes of the individual participant's experiences during the training course. The purpose was to illustrate richly what happens and how changes happen during these weeks of learning and practicing mindfulness meditation. It is not the intention to give evidence about the effectiveness of mindfulness meditation in general, but to present the *whats* and *hows* of cases where mindfulness meditation appears to improve quality of life, health and well-being.

Key words: Mindfulness meditation, experience, embodiment, well-being, mental disorder, life change, narrative inquiry

Introduction

Mindfulness has its origin in different philosophical traditions, but is mainly associated with Buddhist philosophy and psychology, especially the *Abhidhamma Pitaka*—canonical writings based on content of the Buddha's treatises compiled by his disciples and scholars (see: Bikkhu Bodhi, 2000; Nyanaponika, 1998). Mindfulness can be described as a specific embodied intentional orientation of “paying attention in a particular way, on purpose, in the present moment, and non-judgmentally” (Kabat-Zinn, 1994, p. 4) where the focus is on the cultivation of conscious awareness and attention from one moment to the next in an open, curious and accepting way (e.g. Bishop et al., 2004; Germer, 2005).

Mindfulness and Buddhist psychology have a growing influence and impact on Western psychology, behavior change, care giving and psychotherapy (Kwee, Gergen, & Koshikawa, 2006; Germer, Siegel, & Fulton, 2005), and there are a growing

number of studies that indicate a positive effect of mindfulness intervention on several different disorders including: stress, chronic pain, anxiety, depression, eating disorders, psoriasis, multiple sclerosis or myalgia (for an overview, see Baer, 2003; Melbourne Academic Mindfulness Interest Group, 2006).

In the study reported on here, my intention is not to present further evidence of the positive effects of mindfulness meditation, but to explore the “*hows*” and “*whats*”. By going in-depth with a small number of selected cases my aim is to clarify *what* happens and *how* it happens when mindfulness meditation training seems to have a positive effect on specific disorders or on personal well-being in general. To date, this research perspective has not been very noticeable in the literature. A focus on the *whats* of a narrative invites the reader to get a picture of general topics and to reflect on specific themes and issues related to the field of investigation. According to Sparkes (2005) the *hows* can be brought into focus in the process of therapeutic employment, i.e. in an

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“active process by which people creatively engage with and make sense of a story so as to determine what is really going on and what is likely to happen as the story progresses” (p. 204). Furthermore, the *how*s can be related to performative aspects of narration: When people are telling stories about their lives they perform their preferred identities (Riessman, 2003).

The article starts with a presentation of the narrative approach, which is an important basis for the understanding of the methodology and concept of the whole article. After giving information about the concrete research context and methods, three stories of participants in mindfulness training are presented. The article concludes with a discussion of the results.

The narrative approach

Against the backdrop of the *crisis of representation* within social sciences (see Denzin & Lincoln, 2000) there is a growing endeavor to find new forms of data representation by giving a distinct voice to the participants of our research (Tierney, 1998), e.g., through life history, narrative or performative approaches. These stories express the lived experiences of the individual and give a picture of how research participants deal with life challenges. Many of these challenges are faced by more or less everyone in the (post)modern era—an era that can be characterized by growing diversity, social diversification and a break-up into innumerable lifestyles (Beck, 1993; Gergen, 2000). As a consequence of these fundamental social changes, identity development becomes a key issue of our time (Giddens, 1991; Keupp, Ahbe & Gmür, 2002). Identity is no longer something we are born with—on the basis of social background, religion, neighborhood or family. Identity has become a permanent developmental process and psychological constitution in our day-to-day living, illustrated by inundation of tasks and duties, by shifting social relationships, and by demands for a permanent readiness for change. All of these challenges can potentially lead to stress, sleeplessness, social isolation, eating disorders, depression and other psychological “disorders” of our time (Skårderud, 1999).

The diversity of lifestyles combined with the social demands and individual ideas on actual living conditions have established a life situation where the individual has to develop personal identity projects which they can nurture through their own and others’ stories (Gergen, 2000; Kraus, 1996; Miller, 1994). Therefore a research-based unfolding of narratives—the central objective of this article—can have an impact on the personal and social

development of both the participants, by being involved in the study, and the reader, by being moved by the presented stories. Sharing narratives with others can become an emancipatory project. We can support each other in the development of our identities through telling stories about our own and others’ lives. By referring to Freeman, Bochner (2001) describes the virtues of narratives and offers the following portrayal:

We narrate to make sense of ourselves and our experiences over the course of time. Thus, narrative is our means of recollecting the meaning of past experiences, turning life into language, and disclosing to us the truth in our experiences. Narrative is true to experience in the sense that experience presents itself in a poetic dimensionality saturated with the possibilities of meaning, however perishable, momentary, and contingent (p. 134).

At this point it is relevant to examine the two central terms “narrative” and “story”. There is a discussion in the literature about similarities and differences between these terms (see e.g. Smith, in press; Frank, 1995). I prefer to use the two terms as synonyms. A narrative is “a spoken or written account of connected events; a story” (The New Oxford Dictionary of English, Oxford University Press, 1995). Following a similar line Sabrin (1986) defined the story:

as a symbolized account of actions of human beings that has a temporal dimension. The story has a beginning, middle, and an ending. The story is held together by recognizable patterns of events called plots. Central to the plot structure are human predicaments and attempted resolutions (p. 3).

The stories of others can be a bearing compass for the listener or reader, which can help them form and revise own narratives, and through that, make their own way of living (more) intelligible. Furthermore, the particular stories resulting from this research might give the clinician detailed insight into the client’s experiential world while practicing and training mindfulness meditation. This insight can provide a deeper understanding of how mindfulness intervention influences mental processing, and new insights can pave the way to the further development of methodologies for teaching mindfulness.

Through using diaries and interviewing, the researcher has invited selected participants to bring forward and reflect on their experiences, thoughts, feelings and actions, and furthermore on their

expectations, accomplishments and dreams. By asking questions and relating to their words, the researcher became co-creator of the narrative reality that came into being. While the starting point in the interview was, of course, about the personal experiences of the participants in relation to their mindfulness meditation training, the treatment of the different issues in the interviews were the result of a process of co-created meaning-making (Gergen & Gergen, 1988).

Research context

The narrative investigation presented in this article was part of a larger study, which will be reported elsewhere. The main study was based on the non-participant involvement of the researcher in four different six or eight weeks' mindfulness meditation training courses based on the work of John Kabat-Zinn (1990, 1994, 2005), Ferris Urbanowsk (www.ferrisurb.org), and Williams, Teasdale, Segal and Kabat-Zinn (2007).

The courses

The courses were led by chartered psychologists with a cognitive-behavioral orientation. The training sessions were organized in two- or three-hour blocks (two-hour blocks in the eight-week course and three-hour blocks in the six-week course).

The different instructors knew each other through education and professional cooperation, but each designed their own courses. However, the courses were similarly structured. The course instruction was based on detailing the intention and content of the whole course and of each session; giving theoretical background about different phenomena like stress or anxiety; introducing different meditation exercises; and inviting the course participants to share their experiences, thoughts and feelings in regard to specific exercises.

All participants were encouraged to meditate every day or at least several times a week. They were also given specific homework which involved undertaking an everyday activity (e.g. brushing teeth, boiling coffee, drinking tea, eating a piece of cake or fruit) in a mindful way, being aware of the moments and sensations. This is known as *informal meditation* or the *Daily Routine Meditation*. To support mindfulness training at home every participant received two CDs with four different guided exercises—the most central exercises of the course. First, a breathing exercise (10 min). Second, body scanning; where the participant learns to be aware of the different body parts (30 min). Third, mountain meditation; where the participant is invited to

imagine him- or herself in a solidly placed mountain including landscape, weather, etc. (12 min). Finally, a sitting meditation where the participant learns to be aware of breathing, thoughts, feelings, bodily experiences, and sounds in the environment (30 min). Several other forms of meditation were taught in the class and referred to by the participants. Two of these forms were especially mentioned by the participants in the interviews: One was the *Daily Routine Meditation* described above. The second meditation is *Loving Kindness*, originally one of the four *brahma viharas*, where Buddhists cultivate the quality of heart (see Germer et al., 2005, p. 294). In this meditation the participants are asked to develop a positive, appreciative, accepting and loving attitude to friends, to themselves and to specific persons they are having difficulties with.

The courses were held in premises which were fairly neutral and functional in their appearance and equipment, i.e. without pictures on the walls but an overhead projector, a black board, and a flip-over pad to write on. A chair, mattress, pillow and blanket were available for every participant. Three courses were in the afternoon after work; one course was in the early morning hours from eight to ten o'clock, so that the participants could manage to go to work afterwards.

The research project

The research group¹ had several meetings with the instructing psychologists of the courses. At these meetings, the research strategy was explained and mutual expectations and conditions were shared and agreed upon. The whole research project has been approved by the research ethical committee of the municipality. In total sixteen participants were included in the research project. All of the participants joined the research project voluntarily and felt that their participation could also benefit their involvement in and adherence to the training. They were aware that their experiences (in an anonymous form) might be presented in publications.

For the narrative study presented in this article three participants were selected (two women and one man). The three participants were invited because they were those participants in the group who had to handle the most serious life challenges (stress/sleepless, depression, agoraphobia). From the beginning of the course, they had high expectations and hopes that mindfulness meditation might help them—after having tried all different kinds of medical and psychiatric treatments earlier in their life. The three participants had no previous experience in meditation and they were taught by different instructors.

Method

The objective of the case analyses has been to shape three stories—representing the main results of this study—which aim to unfold the lived experience of the participants during their mindfulness meditation training. Richardson and Adams St. Pierre (2005) define this approach as “writing as a *method of data analysis*” (38; italics in the original).

Data collection

The research interviewers participated twice in every course and wrote field notes of their observations. The field notes were meant to ensure contextualization and ecological validity (Brewer, 2000) in relation to the primary data material.

The participants were asked to write diaries on ready-made forms with an introductory text and to post them on a week-by-week basis in prepaid envelopes to the university. Some participants invested a lot of time in writing diaries; others did very little. The diaries were included in the analysis of the interview material, but the interviews formed the main, most reliable and extensive sources.

All participants were interviewed three times: in the beginning, middle and end of the course. Each interview lasted between 40 and 75 min. In all interviews the same interview guide was used. In the first interview the guide was expanded by questions about illness history, reasons for joining the course and expectations with regard to outcomes. The third interview included, in addition, questions in which the course instructor and the teaching situation were evaluated. The interviews were either conducted in the office of the research interviewer or in a place chosen by the participant—often in the home of the interviewee. In most cases, the leading research interviewer was substituted for the second interview by a research assistant who was a member of the research group and thoroughly familiar with all procedures.

Each interview was conducted on the basis of a semi-structured interview guide where the initial focus was on *felt experiences* or the *felt sense* (Gendlin, 1997) of specific situations during the participant’s meditation training either during the last lesson or at home. During the whole interview the main focus was on what the participants/interviewees experienced in specific situations. The interviewee was asked to choose a situation or event which was particularly memorable and then to speak freely about thoughts, emotions and specific reflections related to these situated experiences.

Analysis

All nine interviews of the present study (three per participant) were transcribed verbatim on the basis of a transcription guideline, and afterwards listened to, both to ensure the accuracy of the transcription and to become familiar with the material. The interviews were openly coded without having any fixed coding themes beforehand. With reference to Berg (2001) the purpose of open coding is to “open inquiry widely” (p. 251) with the aim of identifying themes that are important to the further analysis.

In a second step all quotes of each coding were thematically bundled and collected in a matrix from which more generalized thematic areas were generated (see also Miles & Huberman, 1994). The headlines of some of these generalized thematic areas were the following: Experience of mindfulness, words or metaphors describing mindfulness, thoughts, feelings or reflections, illness stories, effects or learning in relation to the training, life dreams or ambitions, possible difficulties. Exploring the meaning of specific coding themes was done in order to prepare for the next analytical procedure.

In this third step of the analysis a storyline and finally the narration itself was developed. One central criterion for a narrative is that past, present and future is knitted together in the narrative. Furthermore, specific events and situations are chosen and highlighted to make the narrative both coherent and faithful to the interview material. This process of shaping the storyline is part of the interpretation and analysis of the qualitative material. Like any qualitative analysis, we do our best by striving towards a form of credibility. The intention was to use Richardson’s (2000) idea of writing and storytelling as a way of analyzing interview material: “Writing is also a way of knowing—a method of discovery and analysis. By writing in different ways, we discover new aspects of our topic and our relationship to it. Form and content are inseparable.” (p. 923). The narrative-analytical perspective used was that the researcher had to develop meaning out of the interview material. In this process, a story written from the first-person perspective of the participant was written—a story which represents the researcher’s *analysis* in a coherent form.²

The questions used for forming each story were:

1. How can the different meaning units be related to each other?
2. How can the storyline of the case be developed, formed and presented?
3. How can the plot of the story be identified and shaped?

With these three questions in mind, a storyline was developed. The meaning units represented by specific interview quotes were first collected and presented in a matrix (step 2 in my procedure) and afterwards combined in a way that they *made sense* in the flow of the story. *Making sense* has a double perspective here:

1. How could I as the researcher make meaning out of the interview material; and
2. What might best represent the participant's meaning as his/her storied effort and achievement.

The focus here was on the *whats* – the analysis of structure and form (Sparkes, 2005). The central question was: What basic narrative form evolved out of the material? Here, I refer to Gergen and Gergen (1983) who present three different forms:

1. *the progressive narrative* where the storyline is going upwards (e.g. I have once been depressed, I started to do mindfulness meditation, and today I feel great);
2. *the stability narrative* (e.g. my life is like this, I try to do something new, but nothing changed); and
3. *the regressive narrative* (e.g. I fell in love, got married, but I have so many conflicts with my partner, and I think we are getting divorced).

Having identified the narrative form for each story, the next task was to assemble the different units manifested in specific quotations from the interview material and diary notes. From these units, I composed the narration as a coherent representation of what I perceived as the essence of the qualitative material.

For the narrative presentation I let the single participant tell his or her story. The focus here is on the *how*—“why a story is told in certain ways” (Sparkes, 2005, p. 194). The intention was to give the individual participant a strong voice, to let him or her speak directly to the reader in order to enhance the potential impact of the story on the reader. A story told from a first-person perspective would also best fulfill the intention of this article, namely to present personal experiences with mindfulness meditation.

To sum up, the three stories created go beyond the structure of the interviews. Each story was formed on the basis of the analyses of three interviews with the participant in question, supplemented by some of the diary notes written by that participant. Each story was structured, organized and shaped around

a plot; cf. Polkinghorne (1988), who stresses that narratives need to have a plot: “The plot is able to weave together a complex of events to make a single story... A plot is constructed in the realm of meaning, recording relationships among perceptions” (p. 18). In that sense the narration presented by the researcher aims to collect the different situated experiences, thoughts, reflection and feelings into a coherent story as the analysis of the collected material. In this study, the plot itself was the result of the complex analytic procedure described above.

Criteria of judgment

As with any analysis of research data this narrative representation is a constructive process which has to be done in a manner that lives up to the criteria of credibility (Guba & Lincoln, 1989). Furthermore, this form of analysis has to be met by different research criteria that fit the narrative analytical approach. Therefore, the coherent narratives of all three presented cases and a subsequent discussion should live up to the following four criteria presented by Richardson and Adams St. Pierre (2005) as follows:

1. *Substantive contribution.* Does this piece contribute to our understanding of social life? Does the writer demonstrate a deeply grounded (if embedded) social scientific perspective? Does the piece seem “true”—a credible account of a cultural, social, individual, or communal sense of the “real”?
2. *Aesthetic merit.* Does this piece succeed aesthetically? Does the use of creative analytical practice open up the text and invite interpretive response?
3. *Reflexivity.* How has the author's subjectivity been both a producer and a product of this text? Is there adequate self-awareness and self-exposure for the reader to make judgments about the point of view? Does the author hold himself or herself accountable to the standards of knowing and telling of the people he or she has studied?
4. *Impact.* Does this piece affect me emotionally or intellectually? Does it generate questions or move me to write? Does it move me to try new research practices or move me to action? (p. 964)

All three participants were given copies of their story as presented in the article, in order to give them the opportunity to provide feedback. None of them had any objection.

Results

As described in the method section the results of the narrative analyses of the material will be presented exclusively in the form of three stories. The stories stand as an invitation to the reader to get a glimpse into the lifeworld of three individuals who in periods of their lives have struggled more than others in order not to lose hope for a fulfilling life. The title of each narrative expresses the central plot of each story.³

Emma's story

(65-year old, retired academic, married). Struggling with sleeplessness and stress: "Not merely a technique for falling asleep—I gained so much more!"

I have always been good at seeing what was good for other people. When people want to get out of the situation they are in, or have solved a problem, then it is easy for me to involve myself, and when they accept it, I get sort of enthusiastic. But I don't have myself on board. I forget myself. On the other hand, I always have to remember to tell other people if I see something for them [something they are looking for]. I get up and make notes when I want to remember this or that. I don't have a single moment of rest during such a day. My aim is to learn to sleep when I have to—and not to lie in bed for about 12 h where the first three or four hours are spent mulling over what I could or should do, and so on. My problem with sleep is so great that I can only get through holidays if I take sleeping pills. I want to be able to do more, to travel some more. I have never done water colors before but that is something I've started on. I need more time to myself. I'm not sure that I can begin to help myself. I can only see this in relation to other people. Where does this come from? In the same manner, I was supposed to anticipate everything for my Mom, in my childhood. I was never myself and—poor me—if I didn't anticipate her needs. So that aspect is really deep-seated in me. And it works well, because people like to receive attention. But, as it happens, it affects me and my health rather a lot. I want to be free of worries. Because I can't sleep, because I can't achieve any peace—and it wears too much on me. I had hoped that I could learn a meditative technique. I believed that you would just nod off. In the beginning, when I was practicing mindfulness at home, I sometimes had to stop. I thought it was so stressful and sometimes it got so bad that it set off a migraine attack.

It has been different after having attended Mindfulness for some weeks. When I came for the fourth lesson, I came close to getting a migraine attack. It starts with a headache and then I start to feel queasy. That was how I felt when we started. I thought, 'Should I take that migraine pill now—this is really early. No, I will wait; what if I try to relax now'. I nearly got into a panic by the thought that I might have migraine later that night, because then I wouldn't be able to take another pill. Then it actually went before we finished. Before the last half hour it had gone away and I had extra physical strength and energy when I came home.

I feel like going over my entire person with the exercises the PSYCHOLOGIST give us during the course of such a week. It is like they zoom in, more and more, on me. I become a little bit more aware of what I am doing and what I am saying to people or how I am answering. I remember when we had the Body Scan for the first time I said that I never wanted to do it; I was so stressed and so restless and the exercises were so difficult that I had hot flushes. By contrast, if I get a more complicated exercise now, I'll think; 'No, I think I'll have the Body Scan'. I do in fact manage to become aware of all the places on the body that are mentioned on the CD.

The fifth time, we had a meditation called 'Loving Kindness' and it made a strong impression on me. You have to give acceptance and kindness to yourself and such a deep sense of joy moved down through my body. You could also use this acceptance and kindness towards a person you have a problem with or are angry with. But that part did not do anything for me at all because this is the very thing I normally offer and this is what really wears me out! Afterwards, when we were talking about how we had been experiencing it, I was thinking again; I do let other people 'invade' me with their problems all the time. This means that other people are governing my life and my thoughts because I am thinking about them. It felt as if this was natural. I had thought that *my* way of reacting was natural. The new thing is that I can now expend this kindness and acceptance on myself without even thinking that it was wrong or that I was letting other people down. I became a little sad, but also a little moved. It was nice to be in touch with myself. It is still at this emotional level that I think I have to hang on in. This happened the fifth time and it happened again during the Mountain Meditation the sixth time and last time. I saw myself; it was me who needed

care and hugging. I felt I had let myself down and not shown [myself] any consideration. It was like a reunion with myself. I am sorry that I have failed for so many years or that I haven't been aware of this.

I can't understand at all that what has happened to me is real. I also stop briefly when I experience certain situations. I haven't viewed things this way before or I wouldn't have been ready to view them this way. It's becoming more and more obvious to me because it is becoming an increasingly greater part of me. Like, for example, my big problem about learning to go to sleep, here it matters. After some days without having really noticed it: I have taken fewer sleeping pills. I experience that I fall asleep in a different manner. Now I can feel that the sleep is approaching slowly and I can register this condition and think; 'Well, now I am just about to fall asleep, now it won't be long'. I can't remember ever having been in this state before! I can start focusing on the breathing and I can fall sleep again so that I get another couple of hours of sleep if I need it. Several times it has helped me to use the short meditation where I listen to the CD.

I must really have 'invaded' many people with the way I have been behaving. I can be quite trusting and then I think others become like trustful, too. But I do realize that it shouldn't be like this in all situations. I try to judge things in each, separate situation – and yet, to not judge all the time. Yes, there is something about this judgment. This is the first time in my life that I have to think about my behavior and how I have been using this 'auto pilot' in me; there was a kind of pattern and this was how I thought it should be.

I think the course has been a success throughout. Although I would get frustrated the first couple of times and couldn't understand what it was about. I thought, I was only there to learn about meditation, and that when I achieved a sense of relaxation in the body I would probably fall asleep. I hadn't believed in this insight into myself—that I would learn something like this on a course—I wouldn't have thought so. I thought that I was just supposed to play a meditation tape and if everything went well, then I would fall asleep. It's the insight into myself and the tools to exist in everyday life, to be part of the here and now, to handle different situations, to be better at dealing with things; basically, having a better quality of life throughout the day. And that I do not judge myself. It is best to start afresh each new day and

then I have the same courage all over. And I learned all this in addition to the meditation.

John's story

(52-year old, unmarried, former graduate civil servant on early retirement). Fighting depression: "In a way I feel better now than before I retired"

Back then—I must have been 47—because I am coming up to 52—I was made redundant from my job in CENTRAL GOVERNMENT. I couldn't function in that position and so I got a special pension based on the 23 years I had been paying my contributions to my unemployment fund. This was sort of reasonable from a financial point of view, at least for the time being.

I was unemployed for a period of time and then I felt a little bad. I mean, I didn't feel very well and then I tried different pills that I got through my psychiatrist. I remember that we had a 25th anniversary college jubilee in year 2000. There, I had this feeling about my life that I, in a sense, had been drifting along on some sort of current where I had ended up going somewhere totally wrong. I felt like I was some driftwood that had been thrown hither and dither or some small vessel, that was kind of out on the sea in a ferocious storm and sometimes in calm waters, too. Still, a small vessel is very much dependent on the weather and you don't know where you are drifting in life.

My depression meant that I could not do very much with my everyday life considering that I have many interests. Lack of enjoyment and lack of energy! Well, there were no real thoughts of suicide. It was like I just wanted to lie on the sofa and in bed and didn't want to see anybody. When it was bad, I really just felt like being left on my own.

The pills had occasionally worked quite well but this was only during certain periods. Then I have also been attending some psychotherapy, some quite ordinary therapy, in fact with a psychologist in TOWN—and then with a psychiatrist who offered private consultations. So it was a combination of pills and therapy. I still take pills, these CipraleX [?] and something called Mirtazapin in the evening. These are the most famous brands—I don't know how much you know about this subject. I think it had sort of grinded to a halt with this therapy with PSYCHIATRIST. There

wasn't any progress. It was like ordinary therapy where I focused on the here-and-now and it was fairly unstructured; there weren't any tasks or anything. At the Depression Society I attended a lecture with somebody who was working with cognitive therapy. This was in early spring. So I thought that now I wanted to try something else. There was an information meeting where you could sign up.

It was like something in the back of my mind; because many people have said something good about cognitive therapy and I was in fact somewhat skeptical: It might well be that it works for some people but not for me, this was actually how I felt. But I thought that it [the therapy at the psychiatrist] had sort of come to a point where nothing was happening, though I was still feeling that I was in a very unsatisfactory state even though I was taking pills. Well, I was in a state of hopelessness before I began seeing PSYCHOLOGIST and then I was thinking: "Does the rest of my life have to be like this"—and I began drinking a bit too much because of the painful situation that I could not make go away. Then it occurred to me that I should try this—cognitive therapy. Then there was this offer of an introductory consultation with the female therapist. And then, it was already on the Tuesday after the meeting, in the middle of the day, that I came for my first therapy session. Obviously, she encouraged me to attend the mindfulness course.

During the long Body Scan last Tuesday I had a good experience—I have actually practiced this one every day since. But then I fell asleep a little bit – sort of nodded off. But other than that, I really had a good experience, the entire time in fact—a state of relaxation where I noticed . . . the breathing, where I become so focused on the process and where there emerged no 'cascades of thoughts'. In any case, I had a real sense of well-being during and after. I felt cleansed. Clarity, overview—overview and well-being.

In our homework, Daily Routine Meditation, I did something about eating porridge in the morning and sensing how the oats change shape. This is a rather intense experience. Often I tend to eat automatically without really thinking about what I have been eating. This is even the case if, for example, I have spent half an hour preparing something. Then, I guess, I simply just scoff it down in five minutes. I have a tendency to eat too much. In this way, I can at least have the same enjoyment from food by eating less—in any case,

I can eat less by eating more slowly and paying attention.

Recently, we did a Mountain Meditation. I imagined myself to be a landscape in the autumn where all colors are exploding and then I thought, yes, in a way I am 51 and in a way this is the autumn of my life—but I thought about how one can be beautiful in different ways. I also experienced a kind of unshakability, certain things could happen but, fundamentally, I am still myself and I have a sort of core. Yes, inside myself there is something that cannot be changed – this here is me; you know, this was a picture of change versus unchangeability. This is a sort of confirmation of myself, that there is a sort of unshakability inside myself.

I think that in mindfulness I learn more about concentration—I learn to cleanse the body. And the thoughts—I have this sense of relaxation and clarity when I have finished. This means, that I can more easily get started on something else when I have finished. I also have a feeling of being at ease with myself since nothing crazy or sensational has happened. So, I feel that it has created greater harmony. There is no doubt that many things in mindfulness have set these things into motion. I easily get started on cascades of thoughts but still, when I just sit down and meditate for a few minutes then I can get it stopped or, in any case, my brain clears up. I register that I am thinking about a certain thing and then, all of a sudden, I can make a decision about it: Is it good to focus quite so much on this? And then I stop automatically, when a cascade of thoughts like that has been set into motion. Of course, I can't say what is due to one thing and what is due to the other thing as I am also seeing a cognitive psychologist.

I have more overview of my life and think I can better control it. The important thing is, that the things [on the mindfulness course] we do, you can do at home, too. So now I've got some really good tools. I think that everything I've learned has been relevant. I feel it takes me further in relation to feeling better about myself and fighting the weaknesses I have.

I dream about being able to carry out the things I would like to do. I like writing; this is probably my main interest. I write on this homepage [for the Depression Society] now. And I would actually like to publish books, my own books—with some humorous stories. We also have a web log that we

write in now and then, some comments about philosophy, politics and so on. So I have a dream about writing a lot and maybe also giving some lectures and entertaining.

I also think that sexuality has some importance here. I mean, I was in a relationship for eighteen years where the sexual aspects were not functioning very well, and I did not feel that I was either particularly physical or sexy. Since then, I've been with a couple of other women, and here the experience was totally different, and then I maybe came into contact with my own identity as a man. Then again, I don't really know. Perhaps it is also because I have been working out for nearly three years, which is significant, too. I don't doubt that having presence of mind means a lot in my case. If you have a date and you are a little absent minded, well that's clearly quite important.

Since I began attending mindfulness a miracle has practically occurred. Things have been progressing calmly and quietly, or steadily. It has in fact become better and better! I have more energy, more appetite for life and I don't have these cascades of thoughts. Another thing too—is the problems with concentration. I have walked around all day, not being able to get anything done; it wasn't until evening that I could get anything done. However, already now I can feel that this has changed and I have much more presence of mind than before when I was so absorbed in my own thoughts, was dominated by my own thoughts. I would almost maintain that I feel better today than when I was well, or was going to work. So I actually feel better. So that's fantastic!

If I say some day: now I want to stop, I mean—taking pills, you know, reduce them right down, when I start on this, then I can try some meditation. In a sense I haven't finished yet, it is only really when the course is over that it must pass its test.

Jane's story

(47-year old professional, married). Fighting agoraphobia: “In mindfulness I practice my attention skills”

I've been struggling a lot with experiences of being very afraid, being very anxious, for many years. I've felt this way, to a greater and lesser extent,

since I was in my mid-twenties and soon I turn 48. There were many incidents and gradually I've gotten my explanation as to why this has happened. I have maintained this situation by arranging things so as not to be alone; then I could cope. When it started this condition was more far-reaching than it is today and it also meant that, at least for a period, I could not leave my home – at one point not even with a companion. However, soon after, I would be able to leave with a companion. Everything, like buses, trains, etc, where I was stuck and couldn't get away quickly—I preferred not to use. Gradually, but increasingly faster, I've been able to do most things as long as I have a companion with me. But this takes a great big planning effort. A real logistics challenge. I have managed to get myself a wide social network, I have my close circle. For example, my husband has been made use of quite a lot and so have the rest of my family, my mother, my brother, my girlfriends and friends. I have spread it out too, so that they could continue being able to cope with it. In many situations I have also been very open about it and then I have found out that it is not so unfamiliar to people. Most of the work places where I have been have also known about it. But where I am now, they don't know about it. I also needed to have some place where they did not know about the situation. It can also help maintain it, that people know about it, so that they kind of make allowance for it.

I have been dealing with it in many different ways and I think that most of what I have been into contact with has helped me: I have tried different types of therapy, in groups and individually. Recently, I've also been seeing a psychiatrist in order to try some medical treatment—which I stopped again; I did not like it. So you could say that I have always been exploring this field. I met the PSYCHOLOGIST/INSTRUCTOR on the course, through her husband who I met at work. I started attending therapy with her but she advised me to start on her mindfulness meditation course. At the moment, I only attend mindfulness, but I have a consultation with her in a month.

I try to push my boundaries all the time, for example, by means of some of the things that I discuss with the PSYCHOLOGIST and by use of mindfulness techniques, too. To say that I get dizzy, that I become afraid, this is OK, I am allowed to do that. Then again, if it happens, I try to get through it without escaping from it. During a Walking Meditation it became clearer to me

what mindfulness is. It is being without judging. And this has been really hard for me to let go of. I think. Should one not judge, should one not relate to what is happening as, otherwise, what is the identity of my person? I have also used some of that thing about shifting attention, for example, by breathing through the place in the body where the feelings are manifesting themselves. This was a very interesting exercise where I clearly experienced an effect in the form of less unrest and a reduction of stress. This was an exercise that I used several times during the following week. At the beginning of the course, I was considerably more tense, and I focused a lot on having to achieve something specific. There was no specific goal other than attention, attention, attention, i.e. to be able to move one's attention about. Halfway through the course I had what you could call a Eureka-experience, or a break-through, in relation to how thoughts and feelings and physical sensations affect each other. We did an exercise where we were supposed to think about something unpleasant, it could be a conflict or something that had caused unease. In the event, I picked a morning when I was walking on the road where I live and I became afraid. In the class we were guided by the INSTRUCTOR/PSYCHOLOGIST. We had to repeatedly return to the thoughts about the situation—it was like an alternation between revisiting the discomfort and then doing the breathing in the place where the discomfort could be felt. We were supposed to enter into this and establish where it was sitting in the body, where it was manifesting itself in the body. Then we were to use the breathing in that place; be breathing into the place where you could feel the discomfort. It could be felt in the midriff. I was feeling a real pressure so, in fact, it could be difficult to breathe and I concentrated on that. I was supposed to linger in this discomfort, I was supposed to linger in that blocking in the midriff and then I was supposed to pay attention to this exclusively, and breathe. Then I was breathing. At first it was difficult and then it became easier and then we were asked to return to these thoughts or situations once again, and then go over them again. By being guided to linger in that situation and go on breathing, I feel that it is reduced. I do manage to get my thoughts removed from the discomfort and I focus on the breathing instead of the thoughts.

There are certain things that I can't do which bother me and which I cannot easily change. However, it's possible for me to change the way

I relate to this. During therapy we have talked a lot about the way the thoughts affect my sensations and visa versa. I have to say that in these exercises, I have experienced things in a different way. Being guided to direct your attention gives me another understanding of something which I otherwise relate to in a more intellectual manner with the PSYCHOLOGIST during therapy. There, too, I am guided to where the unpleasant thoughts are sitting in the body. The difference being, that mindfulness training is more intensive. Well, one can perhaps compare it with having to train physically for something. We had some conversations, the PSYCHOLOGIST and I, where we talked about strategy and about planning exercises and agreeing to things. In mindfulness, it is mainly about training the 'attention muscle'.

I am practicing this at the moment. I do it in the morning; I go for walks with my dog because my husband leaves for work early. It is like this every morning. I don't like it, every morning, ugh, and at the moment it's also dark, and it's rainy and I have to go out with the dog. I have to pull myself together to do it. Then, when I came out onto the road, I saw that the lights were on at the neighbor's; a really pleasant, sweet and friendly man. You know, that light, it was something that changed my experience this morning. There was a light on and then I got thinking that other people, too, were up and about. This is good and it is even a nice man who is up and about.

This really makes sense to me because I let myself become affected, I am easily affected. I'm very sensitive about things in my everyday life that I don't have much chance of changing. This is something that I can't change but perhaps I can become better at learning how to relate to it in a different way. Yes, in a certain sense I think that either I give it attention in some other way or I stop giving it attention at all. For many years, I have experienced that becoming anxious and afraid was something that came from outside me. Increasingly I've become aware that this is something that stems from me, and, the more aware I become of it, the better I can deal with it. By focusing on one specific thing I stop a train of thoughts. It will return, but it becomes easier if I have already stopped it once. Then it may come back, but it becomes easier to stop. I think that in relation to controlling my anxiety, these are some of the most effective tools I've been presented with over the years. Simply knowing that you can do something, just knowing that if I start to feel

uncomfortable, then I can start thinking in a way that reduces it, or that I can do something that makes it less uncomfortable, that's good. The next stage is to be home alone for a longer period of time. Right now, I can only manage this for a very short period of time; I am out walking the dog and then I am home and then off out again. However, I have a wish to constantly expand the extent of my capabilities. The next really important step is to be able to be home alone, in the first instance for something like half an hour.

Overall, I've gained a greater sense of calm and a greater acceptance of myself, and all my sensations and impulses. This might well be connected with my mindfulness course and my training and that is easier for me to think positively about myself. I usually have a difficult period during the winter. I'm really affected by the changes in daylight and I can really become glum. For the last 5 – 6 years I've been using some light therapy according to an agreement with a psychiatrist. I haven't done it this year; I have my lamp but I haven't been using it, as I haven't had the same need. I feel good. I believe that I can grow. But I also need it to happen at my own pace.

Comprehensive understanding of the results

What lessons might be learned from reading or listening to these three stories? What is our comprehensive understanding?

1. With reference to Gergen and Gergen (1983) we can state that the stories of Emma, Jane and John were all *progressive narratives* where the storyline goes upwards. They were success stories. All three found mindfulness meditation beneficial for their health and well-being.
2. Emma, Jane and John had different symptoms and anamneses, but there seems to be one common phenomenon that makes them mentally vulnerable: It is their way of reacting to environmental cues or to their negative mood by *ruminating and worrying* about themselves or the challenges they face. By ruminating—John talked about “cascades of thoughts”—the participants habitually kept themselves in a state of mind that easily could lead to psychological distress. Various studies indicate that both worry and rumination are likely to lead to anxiety (e.g. Calmes & Roberts, 2007) and that rumination also links other vulnerabilities (e.g., negative cognitive style and self-criticism) to depression (e.g. Spasojevic & Alloy, 2001).
3. Mindfulness seems to initiate a change from a ruminative self-focus towards a perceptual self-focus. Rumination keeps the participant locked in the conceptual mode of mind. Other authors (see Metcalfe & Shimamura, 1995) speak about meta-cognitions which—in a negative or maladaptive form—lead to catastrophic and over-generalized interpretations as well as to irrational negative beliefs or schemas about oneself and the world. To temper this mode, mindfulness participants are encouraged to focus non-judgmentally on specific bodily sensations in the present moment. Williams and Duggan (2006) have emphasized this perspective as offering the possibility of change:

We are helped by knowing that a characteristic of focusing on the body is that it gives us the information in a different way: in a way that is non-conceptual. . . . If people are encouraged to focus on the experience of feelings in their *body*, then the very act of bringing awareness to the bodily sensations is effective at switching off the conceptual mode of mind and allowing the memory to be more specific (pp. 375–376; italics in the original)
4. Embodied cognition appears to play a central role in preparing our participants to discover more possibilities in their lives than before they started their mindfulness training. I offer the following interpretation: the participants *embody* their mindfulness perspective—namely being non-judgmental and attentive in the present moment—as a more general mode of being. It seems that they become less identified with their thoughts and have learned simply to notice the event as it is occurring in the here-and-now. Embodied cognition can be defined as situated, concrete and bodily based. This understanding can be due to the fact that cognitive scientists are gradually changing their ideas about cognition—away from the traditional understanding of the mind as a form of computation towards the notion that sensorimotor coordination plays a central role for cognition and that the “proper units of knowledge are

primarily concrete, *embodied*, lived” (Depraz, Varela & Vermersch, 2003, p. 156; italics in the original).

Discussion

If research is understood “as a sacred act that honors our humanity” (Munro Henry, 2007, p. 496) and ensures that “people recognize, honor, and are grateful for the safe communion” (Richardson, 1997, p. 185)—in this study during their participation in mindfulness training and during the research process—then the presentation of results in the form of these three narratives could be understood as an approach and way towards community building. The intention would be to form a community that includes users and providers of mindfulness meditation training as well as family and friends of individuals who practice—or might want to learn to practice—mindfulness in order to achieve a better life. Together with my three “storytellers” I wanted to invite the reader to share in the stories of Emma, Jane and John; to be open-minded towards their narratives; to show respect for what they are willing to share, and for their enthusiasm about working on their own healing process; and to appreciate the successes they have experienced through their involvement in mindfulness meditation training. Some readers might feel encouraged to start themselves, others will remain skeptical about the ultimate effectiveness of our storytellers’ healing processes. On the basis of these very personal and experientially oriented results, some clinicians and psychologists might feel encouraged to include mindfulness in their own therapeutic practice.

As the researcher, I enjoyed listening to my “informants”. I valued their openness; I valued their willingness to share some of their challenges in life with me—more or less a stranger. While they also justified their participation in the research as a way to “support progress in science”, basically they saw the research interviews and the writing of a diary as providing the possibility to go more in depth with their own developmental process. Jane, for example, expressed the benefits of her involvement in the research project in the following way:

It was indeed really, really good to have said yes to participating; it actually leads me to think more, reflect more and take notes along the way. I really think that this can be a reason for acceleration in regard to what I get out of that; I am getting more sensible about things because I have to put words on things. (Second interview, lines 500–503.)

Having heard Jane’s voice again we are able finally to value the impact of this type of qualitative study. The narratives of our participants give a unique opportunity for the reader to be participant in the developmental process these participants went through. They are an invitation to share experiences and learn from them for one’s own life. In that sense these narratives might give an orientation for anyone who is interested in seeing the possibilities that are in mindfulness as an alternative learning opportunity towards personal well-being and health.

Conclusion

This article aimed to present through narrative voices of three people the unique and embodied changes of each participant’s experiences during a mindfulness training course and the consequences of these experiences for healing processes and life changes. The idea was to illustrate *what* happens and *how* changes happen during the weeks of training. It was not the idea to give evidence to the effectiveness of mindfulness meditation in general, but to present the whats and hows (Sparkes, 2005) of cases where mindfulness meditation appears to be a “success”. I attempted to invite the reader to *read* and *relate* to the three narratives—either from a personal perspective (as a current or possible practitioner of mindfulness) or from a professional perspective (as a current or possible provider of mindfulness training). The focus on the experiential dimensions of mindfulness training elucidated how mindfulness actually works. In that sense the analyses presented through these three stories show *how* training in mindfulness meditation can have a positive effect on the health and well-being of the participants.

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Notes

1. This research is part of a large interdisciplinary CAM-Research project at the University of Copenhagen, Denmark, with several sub-projects and studies (see: www.kufab.dk). Researchers in the sub-project “Phenomenological research of the effects from the three forms of alternative treatment” were Inge Kryger Petersen, Charlotte Barts, Matilde Høybye-Mortensen and Reinhard Stelter. The project was sponsored

- by VIFAB—The Knowledge and Research Centre on Alternative Treatment in Aarhus, Denmark.
- The stories were originally written in Danish, the language used in the interviews and diaries. After finalizing the whole analyses the Danish stories—as the result of the analysis – were translated by a professional translator with a socio-linguistic education. After receiving the translation the author had a final look at the now English narratives and made some adjustments to make the translations as close to their Danish originals as possible.
 - In the stories the reader will find some words in capital letters. These words have originally been names. Furthermore, there are sometimes words in [. . .], which are not originally from the interviewee but are editorial supplements to make the story more understandable for the reader.

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